

Request for Birth Certificate

Town Clerk's Office
Wellesley Town Hall
525 Washington Street
Wellesley, MA 02482

Name of Individual: _____

Place of Birth: _____

(Birth certificates are filed in the City/Town where the person was born and where the parents were residing at the time of birth. Newton -Wellesley Hospital is in the City of Newton)

Date of Birth: _____

Names of Parents: _____

(Please use mothers name at the time of the birth)

Number of copies requested: _____

Your Name: _____

Mailing Address: _____

Contact Info: (phone or email) _____

If you would like to pick up your request at our office, we will call you when it is ready.

The fee for a birth certificate is \$10.00 per certified copy. Please enclose a check or money order in exact amount, payable to Town of Wellesley. Please send a self addressed stamped envelope.

Mail to: Town Clerk's Office
Wellesley Town Hall
525 Washington Street
Wellesley, MA 02482

Please note that every effort is made to process all requests on the day received.

FOR OFFICE USE ONLY

Date Received: _____ Correct Fee: (Yes) _____ (No) _____

Person Contacted: _____ Result: _____

Date Mailed: _____ Date Picked Up: _____